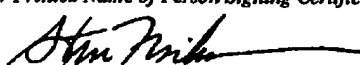



CERTIFICATE OF TRANSMISSION BY FACSIMILE (37 CFR 1.8)			Docket No. JP919990270US1 (14043)	
Applicant(s): Tetsu Shibuya				
Serial No. 09/737,190	Filing Dat December 14, 2000	Examiner Cheyne D. Ly	Group Art Unit 1631	
Invention: A METHOD FOR CHANGING A TARGET ARRAY, A METHOD FOR ANALYZING A STRUCTURE, AND AN APPARATUS, A STORAGE MEDIUM AND A TRANSMISSION MEDIUM THEREFOR				
<p>I hereby certify that this <u>AMENDMENT PURSUANT TO 37 C.F.R. § 1.116</u> (Identify type of correspondence) is being facsimile transmitted to the United States Patent and Trademark Office (Fax. No. <u>703-872-9307</u>) on <u>November 26, 2003</u> (Date)</p> <p style="text-align: right;"><u>Steven Fischman</u> (Typed or Printed Name of Person Signing Certificate)  (Signature)</p> <p style="text-align: center;">Note: Each paper must have its own certificate of mailing.</p>				

P18/REV01

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AMENDMENT TRANSMITTAL LETTER (Large Entity)				Docket No. JP919990270US1 (14043)	
Applicant(s): Tetsu Shibuya					
Serial No. 09/737,190	Filing Date December 14, 2000	Examiner Cheyne D. Ly	Group Art Unit 1631		
Invention: A METHOD FOR CHANGING A TARGET ARRAY, A METHOD FOR ANALYZING A STRUCTURE, AND AN APPARATUS, A STORAGE MEDIUM AND A TRANSMISSION MEDIUM THEREFOR					
<u>TO THE COMMISSIONER FOR PATENTS:</u>					
Transmitted herewith is an amendment in the above-identified application.					
The fee has been calculated and is transmitted as shown below.					
CLAIMS AS AMENDED					
	CLAIMS REMAINING AFTER AMENDMENT	HIGHEST # PREV. PAID FOR	NUMBER EXTRA CLAIMS PRESENT	RATE	ADDITIONAL FEE
TOTAL CLAIMS	12 -	20 =	0 x	\$18.00	\$0.00
INDEP. CLAIMS	4 -	4 =	0 x	\$84.00	\$0.00
Multiple Dependent Claims (check if applicable) <input type="checkbox"/>					\$0.00
TOTAL ADDITIONAL FEE FOR THIS AMENDMENT					\$0.00
<input checked="" type="checkbox"/> No additional fee is required for amendment. <input type="checkbox"/> Please charge Deposit Account No. _____ in the amount of _____ <input type="checkbox"/> A check in the amount of _____ to cover the filing fee is enclosed. <input checked="" type="checkbox"/> The Director is hereby authorized to charge payment of the following fees associated with this communication or credit any overpayment to Deposit Account No. 50-0510/BIM <input checked="" type="checkbox"/> Any additional filing fees required under 37 C.F.R. 1.16. <input checked="" type="checkbox"/> Any patent application processing fees under 37 CFR 1.17.					
 Signature			Dated: November 26, 2003		
Steven Fischman Registration No. 34,594 Correspondence Address Customer No. 23389					
CC:			I certify that this document and fee is being deposited on _____ with the U.S. Postal Service as first class mail under 37 C.F.R. 1.8 and is addressed to the Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22313-1450. _____ Signature of Person Mailing Correspondence _____ Typed or Printed Name of Person Mailing Correspondence		

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P11LARGE/REV06